PART B-FEE(\$) TRANSMITTAL

and send this form, together with applicable fee(s), to:

Mail

Mail Stop ISSUE FEE Commissioner for Patents

PO Box 1450

PREV. PAID ISSUE FEE

Alexandria, Virginia 22313-1450 (571) 273-2885

TO TRADE INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block I, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)

49443

7590

04/26/2007

PEARL COHEN ZEDEK LATZER, LLP 1500 BROADWAY 12TH FLOOR NEW YORK, NY 10036

APPLIN, TYPE SMALL ENTITY ISSUE FEE DUE

Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

Certificate of Mailling or Transmission
I hereby certify that this Foo(s) Transmittal is being deposited with the
United States Postal Service with sufficient postage for first class mail in an
envelope addressed to the Mail Stop ISSUE FEE address above, or being
facsimilic transmitted to the USPTO (571) 273-2883, on the date indicated

	uerow.
(Depositor's Name)	
(Signature)	
(Dante)	

TOTAL FEE(S) DUE

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

	APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
•	10/799,586	03/15/2004	Han Ziv	P-6672-US	8275

PUBLICATION FEE DUE

TITLE OF INVENTION:

PERTURBED MEMBRANE-BINDING COMPOUNDS AND METHODS OF USING THE SAME

nonprovisional NO YES S	1400- 700	\$ 300	\$0	\$ 1700- / 00 C	07/26/2007
EXAMINER	ART UNIT	CLASS-SUBCLASS	7		
SAMALA, JAGADISIIWAR RAO	1618	424-001110	_		1
1. Change of correspondence address or Address" (37 CFR 1,363). Change of correspondence address Correspondence Address form PTO/SB/122): "Fee Address" indication (or "Fee Add PTO/SB/47; Rev 03-02 or more recent) Customer Number is required. 3. ASSIGNEE NAME AND RESIDENCE D.	es (or Change of attached. ress" Indication form attached. Use of a	(1) the names of up attorneys or agents OR, (2) the name of a single registered attorney or ag to two registered patent name is listed, no name D ON THE PATENT (prim	to 3 registered patent alternatively, firm (have as a member a seal) and the names of up attorneys or agents. If no will be printed.	2 <u>1.ATZER, LLP</u>	
PLEASE NOTE: Unless an assignee is ide filed for recordation as set forth in 37 CFR 3.1 (A) NAME OF ASSIGNEE		form is NOT a substitute for			nent has been
(A) NAME OF ASSIGNEE		(B) KES	IDENCE: (CITT and ST	ATE OR COUNTRY)	
NST NeuroSurvival Technologies L	.td	Petach-1	Tikva, Israel		
Please check the appropriate assignce category or ea 4a. The following fees(s) are enclosed: S Issue Fee	tegories (will not be pri	4b. Payment of Fee(s):	vidual Corporation or		Government
Publication Fec (No small entity discou	nt permitted)	Payment by credit	t card. Form PTO-2038 is	attached.	
Advance Order - # of Copies 2				arge the required fee(s), of 5 (enclose an extra copy of	
 The following fees(s) are enclosed: 				TITY status. See 37 CFR 1.:	
NOTE: The Issue Fcc and Publication Fcc (if or other party in interest as shown by the reco				stered attorney or agent; or	the assignee
Authorized Signature:	(any		te: July 12, 2007		
Typed or printed name: Guy Yonay		Reg	gistration Number: 52,38	3.8	

This collection of information is required by 37 CFR 1/311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering preparing, and submitting the completed application form to the USPTO. Time will vary depending on the individual case. Any comments un the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

OMH 0651-0033

07/12/2007 HDEMESS2 00000086 503355 10799586

700.00 DA 300.00 DA

01 FC:2501 02 FC:1504 03 FC:8001 6.00 DA